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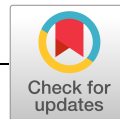
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Managing menopause at work: The contradictory nature of identity talk

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Abstract

This article explores how older women experience and manage menopause at work by asking how female workers construct their work identity around their experiences of menopause at work. Based on qualitative data from 21 women in Edinburgh, UK, findings suggest that women engaged in conflicting behaviors to manage and make sense of their menopausal bodies at work. On the one hand, women engaged in a highly resilient, neoliberal discourse around controlling and managing the symptoms at work. Conversely, data emerged reflecting a negative and self-deprecating identity talk in how women described themselves in relation to the menopause. This article responds to the call for more nuanced empirical work on factors affecting extending working lives and experiences of menopause at work. While research output generally acknowledges the need for organizations to better understand individuals' needs at work and not to be blinded by anti-ageing discourses, this article recognizes that individual women themselves must also heed this advice to more effectively navigate the menopause through continued labor force participation. This article also concludes that menopause management at work must consider that individual women face their own unique cocktail of menopause symptoms, as such blanket human resources policies on their own might be inadequate to improve employment

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outcomes of women challenged and interrupted by the menopause.

KEYWORDS

extending working lives, identity work, menopause, women, work

1 | INTRODUCTION

Identity is said to bridge the gap between the individual self and society or social structures where identity is constructed through discourse—discursive articulation of identity is seen as an ongoing iteration between what is projected and what is perceived (Ybema et al., 2009). This form of “identity talk” is viewed as inherently positive, used to present the self, or the organizational agent in a positive light in relation to what is appropriate, desirable, or valued within the world of work (Schein, 1975). Furthermore, as researchers, we are prompted to “take language seriously” (Ybema et al., 2009). We are to challenge popular social discourses associated with an “undesirability of ageing” and find personal relevance in individual discourses of bodily ageing (Coupland, 2007), where discourse is the mechanism for identity narrative (Beech & Sims, 2007). However, due to a paucity of empirical studies on negative identity talk, there are few examples of when, where, and why individual workers actively engage in self-deprecating identity talk (Butler, 2019; Ybema et al., 2009). Self-other identity talk tends to emphasize the distinctive or the favorable, as such few studies demonstrate individual and situational circumstances where organizational agents engage in “indecisive, insecure, critical or self-deprecating” identity talk (Caza, Vough, & Puranik, 2018; Sveningsson & Alvesson, 2003).

This article analyzes experiences of older female workers from an Edinburgh-based study into broader experiences of the appearance of bodily ageing at work. It emerged that female participants engaged in negative identity talk in relation to menopause symptoms at work. Contradictorily, this negative, emotive, and self-deprecating discursive display of fear and of a reduced performative value at work was presented alongside a highly neoliberal narrative around managing the menopause. This study shows how menopause-related identity talk, or “*menopause talk*” as it is coined here, was articulated at work and conducted through the presentation of a subjective body image.

There is a clear business case for understanding how the menopause impacts older female workers. While the average age of menopause in the UK is 51 years, it usually occurs between the ages of 45 and 55. Seven out of 10 women of menopausal age are actively engaged in paid employment in the UK (Health & Her; Office for National Statistics (ONS), 2018)—not taking into consideration unpaid workers such as carers. Eighty percent of women between the ages of 40 and 55 years experience up to 34 symptoms of the menopause and 25% of women suffer “severe” symptoms that significantly impact their ability to maintain “normal” performance at work. A recent survey conducted by the ONS (2018) revealed that 14 million working days were lost to menopause symptoms. Furthermore, the “Health and Her” survey found that 370,000 working women aged between 50 and 64 years either left or were planning to leave work because they were struggling with menopause symptoms at work. Furthermore, one in five women who had experienced menopause symptoms reported a negative impact on how their manager perceived their competence at work (Centre for Ageing Better, November 2019).

Bodily ageing at work is gendered in that experiences simply are not the same for men than women. While I approach “gender” and “gendered” not as that which is “done” to women, it is clear from the literature that women experience implicit or explicit demands to portray themselves in an expected and appropriate aesthetic (Jyrkinen & McKie, 2012). Indeed, it has been argued that older women, who are no longer perceived as sexual objects, can become invisible or silenced (Thomas, Hardy, Cutcher, & Ainsworth, 2014) where they are “to be fixed” in some way (Dashper, 2019). Trethaway (1999) asserted that female professional bodies are inherently and overtly sexualized at

work where menstruation and pregnancy are “always a potential professional liability” (p. 445), however, her paper ignored the menopause. More recently, there is a growing literature around menopause at work (Atkinson, Beck, Brewis, Davies, & Duberley, 2020; Grandey, Gabriel, & King, 2020; Jack et al., 2016), however, there exists a paucity in empirical studies that explore how menopause is actually experienced at work.

This article addresses several calls for action. First, researchers were asked to “simultaneously focus on self-definitions and definitions of others” (p. 302) (Ybema et al., 2009), which this article addresses through an analysis of relational identity talk. Second, the extending working lives agenda is gaining more prominence as the working population ages and women over 50 become the fastest growing demographic of labor force participation. As such, there is a need to better understand factors affecting older female workers (Loretto & Vickerstaff, 2012, 2015). Third, gender scholars have called for the ageing female body to be more prevalent in organization studies (Calasanti & King, 2018; Hurd Clarke, 2010, 2018), which this study addresses by recognizing the paucity of empirical studies on the impact of menopause symptoms at work (Hardy, Griffiths, Norton, & Hunter, 2018; Jack et al., 2016), placing the ageing female body front and center of this enquiry. This article responds to these calls by asking: *how do female workers construct their identity around their experiences of managing menopause at work?* The consequences of the findings are discussed in the discussion and conclusion sections.

2 | BACKGROUND

2.1 | The ageing UK labor force

Workers over 50 are the fastest growing sector of labor force participation in the UK due to an ageing population (Sanders & McCready, 2010), where one in three workers will be over 50 years of age by 2020 (ONS, 2016). As the Baby Boomer generation reach retirement, the “old-age dependency ratio,” where a smaller proportion of working age adults support the broader population, continues to increase (Edge, Cooper, & Coffey, 2017). As such, delaying retirement and extending working lives is the subject of intense social and economic focus (Altmann, 2015; Loretto & Vickerstaff, 2012), however, we know little about how experiences of the appearance of bodily ageing interact with working longer and even less about how the menopausal body is seen, understood, and managed by women and others within their organizational contexts (Atkinson et al., 2020). Organizational research on older workers tends to problematize age, constructed as limited with declining health and social and economic redundancy, or the “ubiquitous narrative of age as decline” (Trethewey, 2001). This enquiry is set against a backdrop of the “problem of ageing” as gendered and in need of a solution (Coupland, 2007), where an ageing body is synonymous with “degeneration and slowing down” (Riach, 2007) in a world of work where the menopause is often considered taboo (Atkinson et al., 2020; Grandey et al., 2020).

2.2 | Gendered bodily ageing at work

The body, specifically the relationship workers have with their ageing body, has been largely absent from organizational literature, which is surprising considering the centrality of the body to a worker's sense of identity (Calasanti & King, 2018), their productivity (Zacher, 2015), perceived discrimination (Hurd Clarke, 2018), and the ubiquitous nature of performativity of and through the body (Calasanti & King, 2018; Isopahkala-Bouret, 2017; Trethewey, 1999; Tulle & Krekula, 2013). The dynamic interaction of these factors, specifically identity, is of particular interest in this article due to its reciprocal nature with a work context (Miscenko & Day, 2016). Designed to appeal to the organizational concept of the “ideal worker,” the neoliberalist view of ageing encourages older workers to maintain or even mask the effects of bodily ageing that might hinder perceptions of their productivity in the workplace, presenting an image of the ideal older worker as someone “who hasn't actually aged at all” (Rowe & Kahn, 1998, 2015).

The female body “ages” through the menopause: “waists thicken, busts lower, stomachs expand, shoulders move forward” (Goldsberry et al., 1996; cited in Twigg, 2012). In a world where older women are expected to demonstrate behavioral norms based on their chronological age, often resulting in experiences of being marginalized (Krekula, 2007), these normal biological changes can result in a paradoxical situation where women are simultaneously expected to “look their age,” while conforming to a youthful ideal of appearance. Older women are forced into a contradictory identity profile. Much of what we know about social constructions of appearance are based on taste, or taste-based judgments (Langlois et al., 2000). This social construct of “beauty as youthful” conveys to older women, more than men, an association between ageing and bodily sagging, wrinkles, grey hair, weight, and posture (Cameron, Ward, Mandville-Anstey, & Coombs, 2019; Hurd Clarke, 2010; Hurd Clarke & Griffin, 2008). Women, due to the appearance of their ageing bodies, are more likely to experience social marginalization (Rhode, 2011), gendered ageism (Hurd Clarke & Griffin, 2008), adverse social and economic outcomes (Bowman, McGann, Kimberley, & Biggs, 2017), and lower self-esteem (Rothermund & Brandtstadter, 2003).

Organizational literature has generally focused on productivity and objective bodily function, referring to the older worker as negative or even “useless,” where older women feel “erased from the workplace” (Thomas et al., 2014). Furthermore, genders differentially experience employment outcomes due to physical ageing and “becoming old” contingent upon industry context and occupational status (Bowman et al., 2017; Warhurst & Nickson, 2007, 2009), supporting Brown's (2015) assertion that work identities are “ad hoc and positional.” For example, women in management positions were judged by their self-presentation and bodies more as they age (Jyrkinen & McKie, 2012) and women were still perceived less favorably as potential candidates for leadership roles despite the increased value of expertise and experience that comes with age (Meister, Sinclair, & Jehn, 2017).

For older women, the body is regarded as a “problematic object” (Krekula, 2016). “Older” is a time of paradox where people can “no longer take youthful bodies for granted; changes in function and appearance mark them as no longer young” (Calasanti & King, 2018). And yet, Isopahkala-Bouret (2017) found that appearance of bodily ageing, in their case grey hair, created an opportunity for older female workers to be seen for their relevant skills and attributes rather than through appearance of ageing; professional women have “good social status,” it is therefore “easier for them to have visibility and to make their voices heard” (p. 275).

Gendered ageing is deeply connected with perceptions, experiences, and sense-making of an individual's “laboring bodies”; skills and experience are so intertwined that they must be studied together as part of a whole (Riach, Loretto, & Krekula, 2015). The performativity of gendered ageing was also positioned as an expression of sexuality, or an exploration of what is “acceptable” sexuality at work (Twigg, 2012). As older women, with their older bodies, become more prevalent in the labor force, it is time that the older female body at work has a greater spotlight on the organizational stage. Since Trethewey (1999) suggested that professional women must “navigate one's body through complex, ambiguous, precarious in-betweens of conformity ... identifying a social desire for women to discipline their otherwise excessively undisciplined and sexualized female bodies” (p. 425), there has been insufficient empirical work conducted on factors affecting identities constructed and expressed through an ageing female body at work.

2.3 | Menopause and the older female body

The menopause can significantly impact identity for older women (Calasanti & King, 2018). It is one of the most distinctive and individualized aspects of gendered health in mid- to later life and is currently receiving greater attention in organization studies (Hardy et al., 2018). The menopause is relevant to organization studies because more women than ever before are working through the entire menopause cycle (Altmann, 2015; Grandey et al., 2020; Jack et al., 2016). Menopause symptoms including reduced energy, anxiety, irritability, hot flashes, and poor concentration can be perceived as problematic, embarrassing, and shameful in the workplace

(Hardy et al., 2018), creating a form of subtle gendered ageism at work where symptoms of menopausal health are considered taboo (Grandey et al., 2020).

It is striking that such a ubiquitous transition in health and wellbeing, which affects 100% of women at some point, in some way, has received such little attention in organizational research (Hardy et al., 2018). Menopause is inherently the end of the reproductive cycle of a woman in a culture where being sexually fertile is part of a woman's value and influence and where gender performances are inherently sexualized performances drawing on a woman's embodied capital (Isopahkala-Bouret, 2017). This speaks to Trethewey's (1999) findings that professional women's bodies are not only performative, but are positioned as "excessively sexual." This uncertainty around the professional body is in opposition with the principle tenets of professional identity, which is suggested to be relatively stable, an "enduring constellation of attributes, beliefs, values, motives and experiences in terms of how people define themselves at work" (Schein, 1978).

Findings from emerging studies on menopause at work suggest that menopause management can be addressed through promotion of "healthy ageing" and improved physical work environments (Hardy et al., 2018; Hickey, Riach, Kachouie, & Jack, 2017; Jack et al., 2016). However, this belies the daily reality of the individual woman's experience in navigating the menopause due to the sensitive and stigmatized nature and the unpredictability of its symptoms (Grandey et al., 2020). However, it is not all negative sentiment about the menopause. Being post-menopausal can offer a sense of freedom through not having to be seen as a sexual being (Trethewey, 2001). Older female workers can stop worrying about meeting other's expectations around appearance, offering a form of liberation from the gendered and sexual self (Greer, 1993, cited in Isopahkala-Bouret, 2017). However, Calasanti and King (2018) reported participants' views of femininity as "prettiness and sexiness," assuming that menopausal changes make the ageing body less feminine. Furthermore, not only does this assume that older females no longer want to be seen as sexual beings, but this separation of self could result in women becoming invisible at work (Calasanti, 2005), despite higher visibility and scrutiny of the female body in highly performative jobs (Meister et al., 2017). While these studies present participant views of bodily ageing, few explore how women talk about the impact of their changing physical appearance due to ageing, such as the menopause, on work identity.

2.4 | Identity talk as identity work

An individual's work identity is complex, where identity can be linked "to nearly everything" in organizations (Alvesson, Ashcraft, & Thomas, 2008). Furthermore, a strong work identity can result in high job satisfaction and source of self-worth (Miscenko & Day, 2016) and yet work identity is "always provisional and contested" where the notion of enduring and stable work identity is denied by contemporary identity theorists (Alvesson et al., 2008; Brown, 2015). Alvesson et al. (2008) suggested that identities are "temporary, context-sensitive, an evolving set of constructions" and are "ongoing internal soliloquies"; identity work is a *continuous process*.

Individuals reflexively attach meaning to themselves through identity (Brown, 2015), subjective interpretations of who they are relevant to their environment (Caza et al., 2018), but what is less clear is the source of these meanings, from who are perceptions sought and what impact do these perceptions have on worker identity and continued labor force participation. Identity work, then, relates to the gamut of agentic behaviors in which an individual engages to construct, shape, maintain, reinforce, or "work on" personal identities and perceptions of others (Coupland & Brown, 2012). This is a subjective, adaptive strategy for older workers resonates with the generalized narrative of ageing as decline (Thomas et al., 2014). Crucially, identity work is engaged when a norm of self-identity reproduction in an otherwise stable context is disrupted, potentially triggering feelings of uncertainty, anxiety, or self-doubt (Collinson, 2003).

The distinction between identity work and other concepts of identity revolves around "becoming, rather than being" (Alvesson et al., 2008). It is this transitional concept of becoming that speaks to the experience of the older

female worker, that is, “becoming older,” where identity work might be more salient through periods of “radical transition” (Ibarra, 1999). The temporal and relational nature of identity work (Coupland & Brown, 2012) makes it an appropriate frame for an exploration of how women who are experiencing bodily change are perceived by others, project an identity to others (Brown, 2001), allow for a publicly, and bodily, display of taste (Cutcher & Achter, 2017). Furthermore, while a neoliberal agenda suggests that identity work is an individual pursuit, Amabile (2019) found that relationships with significant others through social, domestic, and organizational structures can equally provide support or undermine identity work of older workers as they transition through retirement decisions.

Identity talk, as a form of discursive articulation, encourages an ongoing iteration between the social self and self-definition, between what is performed or displayed and what is perceived (Ybema et al., 2009). Identity talk is the performance of identity (Jones & Clifton, 2018). The role of language becomes part of one's identity (Caza et al., 2018; Ybema et al., 2009), informing how the body is presented to others and understood by the self. It is this positioning of self through the body in relation to others that offers workers with “imagined referents as symbolic rallying points” (Ybema et al., 2009). Identity construction and negotiation at work are “chaotic, sometimes contradictory collections” of self (Alvesson et al., 2008; Jones & Clifton, 2018). Identity talk is a form of identity construction, which in turn was identified as part of identity work process (Sveningsson & Alvesson, 2003), as such, this article positions identity talk as a form of identity work.

Relationality, or positional power, contributes to a discrepancy in how we see ourselves and how we believe we are seen by others (Beech, 2011; Brown, 2001; Meister, Jehn, & Thatcher, 2014). Furthermore, it is interesting to note that the key motivation for identity work is coherence and plausibility (Brown, 2015; Caza et al., 2018): coherence is a consistence of personal narrative, but also a coherence between self and environment. Furthermore, plausibility overrides the need for accuracy of personal narrative (Caza et al., 2018), contributing to the question of accuracy over perceptions of self and others. It should be noted that a key motivation of identity work is self-verification, which is reliant on an aspect of change of self in alignment with perceived expectations of others (see Caza et al., 2018, for summary of key papers). It is argued, therefore, that perceptions of self and of others form the basis of identity work as individuals' understanding of the perception of others offers motivation for agentic identity work within organizational structures.

Empirical studies of discursive identity formation and exploration generally posit identity talk as that which is positive, used to present the self in a positive light in relation to what is appropriate, desirable, or valued within the world of work (Riach & Loretto, 2009; Schein, 1975) and to emphasize distinction or favorable aspects of worker identity (Sveningsson & Alvesson, 2003). Indeed, identity work itself is posited as a coping mechanism (Ahuja, Heizmann, & Clegg, 2019). Few studies have identified negative identity talk, and those that do, present it as a strategy of tactical self-deprecation through conflicting organizational discourses (Down & Reveley, 2009), or self-alienation as a mechanism to reconcile a negotiation between putative “real selves” (Costas & Fleming, 2009) or to preserve the integrity of self through separation of self and other (Clarke, Brown, & Hailey, 2009). Furthermore, these empirical studies found a sense of resolution in identity constructs of their participants: successfully protecting new found identities (Down & Reveley, 2009) and effect a solution to threatened identities (Clarke et al., 2009). Furthermore, Butler's (2019) participants discussed menopause symptoms at work through abjection of self, “abjection work,” negative identity talk as a way of coping with menopause at work: using their “inconvenient bodies” as a form of power at work, which was conducted by making others (mainly male colleagues) uncomfortable. While these findings consider a negotiation of self or selves and their “fit” within their organizational fields, they do not address gender or age, or indeed the transitional nature of gendered ageing and they do not consider an outcome in which a cognitive dissonance around competing identity is unreconciled.

An emerging literature around gendered older worker identity has focused on experiences of gendered identity through the body (Calasanti & King, 2018; Gray & Kish-Gephart, 2013; Hurd Clarke, 2018; Riach & Cutcher, 2014), especially relevant to a period of transition (Beech, 2011; Ibarra, 1999). Workers “do age and gender” by managing their behavior mindful of both category-specific ideals (i.e., age and gender) and of the potential need to explain the

rationale of these behaviors (Calasanti & King, 2018). Identities are viewed through categorizations as those which are to be either embraced or resisted (Ybema et al., 2009). For example, there exists a polarized view on whether a woman should embrace her biological age or whether to strive to reduce the appearance of ageing (Hurd Clarke, 2010). Calasanti and King (2018) found that their participants discussed having to work harder to maintain femininity through behavioral practices, which would “prevent them from appearing as if they had let themselves go” (p. 15). However, the freedom of letting go can be “liberating and personally satisfying,” though can also be seen as “unquestioningly accepting patriarchal gender norms” (p. 107) (Hurd Clarke, 2018). This embodied capital employed in or deriving from “working harder” might require new skills in performativity where workers must “always be on” and entuned to the social construction of how capital is valued at work (Garratt, 2015). As Tulle and Krekula (2013) poetically put it: “bodies become social—not inert shells for containing our souls—endowed with meaning ... intention” (p. 8).

While gender retains its “omnirelevant status” as a categorical identity, bodies are gendered objects leading to an expectation of bodily appearance and function based on group membership (Calasanti & King, 2018) and yet it has been asked: what are the core constructs of self-categorization? (Ybema et al., 2009). Tulle and Krekula (2013) remind us that the relationship we have with our bodies changes over time within the construct of social meanings: “we do not invent them—we often reproduce them or others reproduce them through us” (p. 8). This article asks, how do older female workers construct their identity around their experiences of managing menopause at work, which is considered through the subjective value lens of the appearance of bodily ageing.

3 | METHOD

3.1 | Positioning theory

The perspective of this study was grounded in a broader exploration into experiences of the appearance of bodily ageing of female and male workers over 50 years. The purpose of this study was exploratory, as such the study design was open-ended to allow themes to emerge from the data. Findings around menopause were not deductively mined from the data, instead themes around menopause, specifically around menopause talk, revealed themselves with the data to form the findings presented within this article. In fact, as the sole investigator in this study, I did not suspect the menopause would have emerged as such a dominant and emotive theme. Women were not asked directly or indirectly about the menopause: those women who raised the subject of menopause in this study (15 out of 21 female participants) did so voluntarily within a broader conversation around their experiences of the appearance of bodily ageing.

This article draws on individual identity narrative (Brown, 2015; Caza et al., 2018; Ibarra, 1999; Jones & Clifton, 2018) but also considers the nuances of identity formation through a discursive self, or *identity talk* (Ybema et al., 2009). The individual narrative of identity was driven by participants’ social and organizational contexts (Bowman et al., 2017; Warhurst & Nickson, 2009). Tulle (2008) called for a new ontology of ageing, specifically a new approach to studying the subject of ageing bodies, which I address by prioritizing participant perception of selves constructed within these contexts. A social constructionist epistemology lends itself to qualitative data and analysis (Huff, 2009), where qualitative research is capable of providing a more nuanced approach to individual experience, addressing the highlighted lack of individual focus on workers within specific and unique employment contexts (Loretto & Vickerstaff, 2012).

3.2 | Research study

The sample consists of 21 women, living and working in Edinburgh, UK, from a broader study of 29 workers on experiences of the appearance of bodily ageing (eight participants in the study were men). All 21 female

participants self-identified as cisgender women. Interviews were conducted between May 2018 and December 2019 in private spaces either at the researcher's university or at the participant's place of work. Semi-structured interviews were conducted over 1 h plus post-interview discussions and fieldnotes, resulting in a rich corpus of data from which analysis was conducted for the "subjective interpretation of the content of the text" (p. 1278) (Hsieh & Shannon, 2005).

In the UK, it is generally accepted that 50 years is the chronological threshold whereby one "becomes" an older worker (Riach et al., 2015). We must consider, however, that 50 years might seem like an arbitrary number upon which to base this analysis. While there is an argument to refer to older workers, not as those over 50, but those who "feel" older through biological, psychological, or social mechanisms (Bohlmann, Rudolph, & Zacher, 2018), this article relents to the somewhat arbitrary chronological age of 50 for participant selection, data collection, and analysis. Participants were recruited through organizational advertising and word of mouth. The sole criteria of participation were to be over 50 and in paid employment (note the exception to that was Harriet, aged 47 years, who asked to be interviewed). Pseudonyms are used in this article to anonymize participants (Table 1).

Qualitative research allows marginalized and socially invisible groups to have their voices heard (Nico, 2016) and it is the responsibility of the researcher to ensure a faithful representation of their experiences. To that end, I adopted the role of storyteller rather than spokesperson or social activist. I used a flexible approach to question type based on a normative flow of the conversation (Nico, 2016) in addition to probes for these open-ended questions where appropriate (Hsieh & Shannon, 2005), such as "How so?" A topic guide of four open questions was designed based on previous research into appearance bias (Langlois et al., 2000), bodily ageing (Hurd Clarke & Griffin, 2008; Krekula, 2016), and the notion of successful ageing (Zacher, 2015). This broad basis of questioning allowed this exploratory research to "identify factors that might lead to different outcomes from seemingly similar starting points" (p. 3) (Amabile, 2019), being a reference to the relatively homogenous sample.

The interviews began with a simple question asking all participants: Can you tell me about your job and what it entails on a weekly basis? This question was designed to gain an understanding of the context of work. Participants were then asked to describe how their work had changed during their lives, which was designed to capture the life course aspect of a changing nature of work for the individual within structural factors. Participants were then asked what the term "successful ageing" meant to them as workers, which prompted participants to discuss aspects of "healthy ageing." This point of the interview emerged as the most common opportunity for women to raise the subject of their menopausal body at work. The question of successful ageing was motivated by extensive recent work within organization and management studies (see Zacher, 2015, for a recent summary) whereby the arguably divisive and subjective term *successful ageing* is ubiquitously adopted, yet seemingly unchallenged, for work studies on and around ageing. Finally, participants were asked whether their appearance was important to them at work: this question also prompted a discussion around menopause, this time away from health, focusing on how women masked the appearance of their menopausal bodies.

3.3 | Data analysis

As sole investigator on the broader project, I made a critical choice about transcription that I was not apart from the data, that it was an embodied activity and interpretation where the nuances of the spoken word had to be accurately reflected in the transcript, all of which I conducted personally. While a constructionist epistemology might suggest that no transcription is accurate (Huff, 2009), my transcripts reflect a true nature of participant experiences. Data were closely read to derive initial codes following Braun and Clarke's (2006) thematic analysis. Data were then coded to nodes, developing a coding hierarchy. Following Shaw and Langman's (2017) caution, while I actively maintained neutrality where possible, it was inevitable that my own perceptions, assumptions, bias, knowledge, understanding, and research choices were imprinted on the data analysis process.

TABLE 1 Participation demographics

Participant pseudonym	Gender	Age	Marital status	No. of children	Education	Occupation			Sex-type
						Role	Industry	Level	
Harriet	F	47	Married	1	University +	Director	Recruitment	High	M
Adele	F	50	Married	3	University +	Doctor	Medicine/academia	Senior	M
Julia	F	50	Married	0	University	Teacher	Education	Mid	F
Laura	F	50	Single	2	University	Teacher	Education	Mid	F
Rachel	F	50	Married	1	University +	Lawyer	Legal	Senior	M
Tania	F	50	Married	2	University +	Academic	University/academia	Senior	M/F
Ursula	F	50	Married	0	Vocational	Administrator	University/academia	Low	F
Catherine	F	51	Married	2	University +	Counsellor	Counselling	Mid	F
Penny	F	51	Married	2	University	Teacher	Education	Mid	F
Bronwyn	F	52	Divorced	3	University +	Doctor	Medicine	Senior	M/F
Stella	F	52	Married	2	University	Teacher	Education	Mid	F
Deborah	F	53	Married	3	University	Counsellor	Counselling	Low	F
Monica	F	53	Married	2	University	Teaching	Education	Low	F
Georgina	F	55	Married	3	University +	Director	Education	Mid	M/F
Fran	F	56	Divorced	0	High school	Administrator	Charity	Mid	F
Vera	F	56	Single	0	University	Business manager	Arts	Mid	M/F
Isla	F	58	Widowed	2	High school	Administrator	University/academia	Mid	F
Natalie	F	60	Married	2	Vocational	Administrator	Education	Low	F
Evelyn	F	61	Divorced	2	High school	Receptionist	University/academia	Low	F
Kara	F	62	Divorced	2	Vocational	Secretary	Education	Low	F
Orla	F	62	Married	2	High school	Teacher	Education	Low	F

Note: Education label categorized as High School, Vocational, University (indicates a UG degree to PGC), University + (indicates a Master's, Diploma, MD or PhD).

Data were analyzed as within-person and between-person comparisons. Within-person analysis of individual stories around identity work within organizations allowed for an understanding of the “complexities, contradictions and especially the struggles in their accounts” (p. 2071) (Riach, Rumens, & Tyler, 2016). Between-person analysis allowed for comparison between experiences of women by occupation type, severity of menopause symptoms, and management support at work. I closely followed Corley and Gioia's (2004) method of data structure identifying first-order themes using the participant voice as the source of data. I then conducted thematic analysis to create a series of second-order themes, which then were developed over time in an iterative process between existing literature and data coding revealing aggregate dimensions.

A brief note on reflexivity. Alvesson et al.'s (2008) advocacy of the merits of reflexive research was adopted, yet their warning was heeded as to whether organizational research sufficiently engages in reflexivity or merely

gives it a nod as a box ticking exercise. This article, therefore, is an attempt to be “sufficiently reflexive.” Gioia, Corley, and Hamilton (2012) addressed this issue of being too close to the participant view, which is a risk of conducting qualitative research especially around emotive, sensitive, and taboo subjects such as the menopause at work. In applying this concept to my own relationality with women in this study, at the then age of 42 years, I occupied that liminal space between middle age, but not yet an “older worker,” which was relevant to data collection. In post-interview discussions, women provided a response to this relational reflexivity whereby “shared moments of recognition” (Riach et al., 2016) were achieved. This was exemplified by Deborah, aged 53 years, who referred to me in our post-interview discussion as like talking to a “little sister” in her narrative around menopause, in that I was “close enough” to her age but not within range of her experience, creating a liminal position of almost-in-group. Furthermore, Ursula, aged 51 years, cited my age and gender as the reason she felt she could talk about her ageing body, specifically her experiences of the menopause, which she might not have raised with a male or a younger female interviewer:

I think if you'd been a bloke it might have been a bit—(laughs) ... But then you're also not like 25 either. I mean you've lived a life ... so this has been like having a cup of coffee and a blether to be honest, totally comfortable.

Doing reflexivity is a more conscious way of approaching interviewing and subsequent analysis. Being sufficiently reflexive remembers that a researcher's own age, gender, and social location affect the forms and outcomes of research (Johnson & Duberley, 2003, p. 1289) and how individuals relate to each other requires them to be “viable social subjects” within their organizational field (Ford & Harding, 2011). As such, it is relevant to understand how my researcher “viability” affected study design, data collection, and analysis in this article.

4 | FINDINGS

The ways that women in this study spoke about the menopause fell into two categories: performing a neoliberal identity of menopause endurance; and a form of identity talk coined in this article as *menopause talk*. Fifteen out of the 21 women in this study personally raised the subject of menopause, which was not the focus of the broader study. All of these 15 women spoke about managing their menopause symptoms at work through a predominately neoliberal discourse of resilience and self-help. Presentation of their bodies as fit for purpose within their work context was of high importance and there was a sense that responsibility for managing their bodies rested with the individual rather than the employer or broader domestic or social entities. Identity work through identity talk was represented as a form of gendered agency (Jack, Riach, & Bariola, 2019).

However, a within-person contradiction emerged from participant narratives around how menopause symptoms actually impacted their work identity. *Menopause talk* emerged around how women described themselves, their symptoms, and the menopause itself. This was an emotion-laden narrative of fear, precarity, uncertainty, and isolation. Furthermore, there appeared a neoliberal discourse, which positioned a centrality of self in isolation—women felt very much alone through the menopause process and how it impacted them at work. Laura, a 50-year-old teacher, summarized this within-person contradiction by describing her internal battle with menopause and the impact of symptoms at work:

[Women should make] an effort in their appearance, in their self-preservation ... the day you accept the menopausal belly ... it's a good day ... obviously women put on weight as we get older, but we should be allowed to do that without any stigma ... I do think that women need to help themselves ... I have a huge internal battle with it ... I want to embrace it ... there is a physiological reason why this is happening to me, there's not a lot I can do ... [it's] as if I've done something wrong.

The unknown nature of the menopause created a sense of negative, even self-harmful identity talk. While identity talk is generally presented as a positive mechanism (Ybema et al., 2009), a key finding here was that experiencing the menopause at work led to negative identity talk in how women portrayed themselves or felt that they were perceived by others. This communication was through the vernacular of how menopause symptoms mobilized to create a negative sense of self. Ultimately, reluctant acceptance appeared to be a form of identity work as a path to reconciling cognitive dissonance created by the “*internal battle*” of productive worker and a precarious, stigmatized body.

4.1 | Performing a neoliberal identity of menopause endurance

Findings in this category are presented through three overlapping themes of coping with the menopause: coping through silence, coping with unknown bodily changes, and coping by hiding the ageing body. The majority of women in this study engaged in an explicit prioritization of personal responsibility to present an unchanged/unchanging body at work over their own personal health and self-care. The menopause was described as something to be “*endured*,” “*put up with*,” the symptoms were “*minimized*” and women felt that the onus was on them personally and individually to cope with menopause symptoms, without drawing attention to themselves in the world of work. For example, Harriet, a 47-year-old director, summarized this concept with her assertion that she needed to get her changing body “*under control*,” although she spoke about control over the menopause in the future at a time when she will be post-menopausal. Similarly, Tania, a 50-year-old professor, acknowledged the impact that her menopause symptoms were having on her performance at work, and highlighted the need to manage her symptoms through their acceptance:

I'm finding menopause means I'm more reactive, I'm more tired, I'm less resilient and more vulnerable and I don't like that and I'm trying to learn to live with that.

As we saw with Laura, it appeared that reluctant acceptance provided a path of least resistance through managing menopause, which challenged women's sense of neoliberal “can do” attitudes:

It's a rocky time in a woman's life ... this is a physical thing that you just have to get through, I didn't ask for any help with drugs or anything. (Natalie, 60, secretary)

I kinda put up with it ... (Fran, 56, charity worker)

... it's been going on for 10 years ... but I manage, I'm one of these people I'll have a couple of cups of coffee in the morning and I'm fine. (Orla, 62, teacher)

The variability and seemingly indiscriminate nature of the menopause was summarized by Isla, 58: “*it's a different experience for everybody*” and Penny, 51: “*it can sort of change after you get through different stages of the menopause, you know, everyone has got their thing. I think menopause affects people in different way.*” It was this sense of the unknown that appeared to challenge neoliberal behaviors and attitudes. Natalie, 60, who is post-menopausal, was indicative of the slightly older participant who reflected on her sense of resilience by compartmentalizing the negativity of the menopause. Engaging in identity work was to maintain a positive outlook:

... you don't want to over-indulge yourself ... if you make a big issue of this, maybe that will just bring me down a wee bit more having to talk about it all the time, I think you could put it on a wee shelf and

deal with it ... I didn't take time out ... things would happen in the course of a day ... just sitting in tears sometimes, what on earth was that about ... get yourself together ...

Fran and Ursula both sought assistance from their General Practitioner (GP) after several years of trying to privately cope with menopause symptoms at work. Fran, 56, was indicative of many women her age who reported minimizing their own health concerns "*I can't cope with this any longer.*" Going to the doctor was a last resort. Furthermore, Ursula, who went to her GP after a few years of coping with symptoms was unable to be provided with the most common treatment for menopause, Hormone Replacement Therapy (HRT), due to current and ongoing (at time of writing) issues of supply. As a result, she was told to "*struggle on*" and self-medicate:

... and of course with Brexit they [GP] can't guarantee that they can give you continued HRT, they've said just struggle on at the moment ... well I'm shoving myself full of vitamins. (Ursula, 50, administrator)

Furthermore, a within-person contradiction emerged between wanting yet not accepting help. For example, Deborah, a 53-year-old counsellor, also sought medical assistance for what she had assumed was a menopause-related symptom, however, this could not be clarified by her doctor. Due to the uncertainty of whether her symptoms were indeed menopausally related, she chose not to accept the prescribed medication. As a result, her condition did not improve and her continued participation in the labor force was in question:

... I was limping 'cause I had inflammation in my hips, it was also possibly menopausally connected, nobody really knew. I went to specialists who wanted to put me on really powerful drugs, which I was too frightened to take. So, I didn't take them.... I have to think very carefully about how much of the counselling work I do and what I balance it with. So, that will determine how I work and how long I work.

Participants spoke of the physical symptoms of the menopause and how they directly impacted them in their world of work. Many women discussed the impact of menopausal weight gain and how this had directly led to physically hiding the female ageing body at work. This was in part due to and contributed to a lack of confidence at work and a lost sense of identity within the world of work. This was exemplified by Catherine, a 51-year-old counsellor, who described her experience of not seeking work opportunities and promotions because of how she experienced her changing body in comparison with out-group others, in her case younger colleagues. Paradoxically, she acknowledged that these same colleagues were frustrated at her self-defeatist actions:

The intensity of being surrounded by that many young skinny people ... I sort of did it to myself, because others were frustrated that I was doing that ... it was definitely connected to [weight gain] for me.

Similarly, Deborah explicitly reported hiding her body. She described her changing body due to menopause through a discourse that directly threatened her lifelong neoliberal discourse:

Yeah, weight, that's a big issue in terms of getting older, and my not wanting to be seen as a middle-aged woman with a big tyre around my middle, which is what I am (long pause) so I hide, which I why I wear this (indicates baggy, over-sized top).

While neoliberal attitudes of self-help and agentic behaviors were a form of identity work to represent resilience at work, negative identity talk around the menopause interrupted or threatened to interrupt women's

neoliberal discourse of work identity and trait confidence. This created a threat to previously held work identity as emotionally strong, resilient, and capable women, leading directly and indirectly to precarious work outcomes.

4.2 | “Menopause talk”

Within the discourse of menopause, women explored a lack of understanding of bodily changes and a lack of confidence in their gendered ageing bodies at work. Participants engaged in menopause-related identity talk, referred to here as “menopause talk” to describe how they saw themselves and how they perceived that they were being perceived by others at work. Menopause talk was emotive, fearful, negative, and self-deprecating: “*hot emotional mess*,” “*weeping wreck*,” “*you’re a disaster*,” “*I felt so terrible*,” “*too frightened*,” “*I’m hiding*.” Furthermore, the language used to articulate their *feelings* towards the menopause was also emotion-laden and entirely negative: “*torment*,” “*absolute terror*,” “*disconcerting*,” “*panic*,” “*emotional wave*,” “*isolating*,” “*struggle*.” The menopause itself was described through negative nomenclature and sentiment: “*such a big journey*,” “*a hidden decade of awfulness*,” as a personal and individualized process that should almost be endured in isolation. Menopause talk presented a changing and for some, a newly embarrassing body as of precarious value within the world of work.

It became clear from the experiences of these women that there was both a lack of knowledge of menopause symptoms and an awareness of the indiscriminate nature of the appearance of symptoms. Ursula, a 50-year-old secretary, was indicative of this lack of understanding of the menopause, also suggesting a broader concern around ongoing perceptions and actual work performance:

I have an absolute terror that when we do our four-hour senior management meeting that I'm going to take a flush in that cause I have absolutely no idea when they are going to come on ... I was always a hyper-efficient very organised person, and now they've got a hot emotional mess, so you employed this person and now this is what you've got.

The unpredictability of menopause symptoms and lack of awareness combined to create a sense of a menopause symptom minefield at work: “*you just never know when something is going to hit*.” Many women reported “*hot sweats*,” which Stella, a 52-year-old teacher, “*assumed*” was the start of the menopause for her. While many participants spoke about a disconnection with their known body, “*just not feeling myself*” (Fran, 56), there was a general reluctance in seeking medical confirmation regarding the menopause, despite a strong sense of women's lack of knowledge. This was internalized as something “*wrong*” with them:

... you might be fine ... you just never know when something is going to hit—the only thing that is predictable is that I feel tired all the time. (Ursula, 50, secretary)

... there are certainly days where I could have done with not coming in 'cause I felt so terrible and I didn't know why ... it's that feeling of not being myself ... I don't know what's wrong with me. And it is menopause. (Vera, 56, events manager)

This lack of knowledge around the menopause and its practical impact at work was also discussed through a narrative of fear of the unknown. Georgina, a 55-year-old company director, reported being “*lucky*” with her lack of menopause symptoms. She was officially “*post-menopausal*” in that she hadn't had a period in more than 18 months and yet she described the menopause as that which was “*lurking*” as something that might still adversely impact her ability to work until State Pension Age (SPA):

I might be a weeping wreck in a year, so I guess that's another thing that could be lurking, that could suddenly become an issue.

Furthermore, Penny and Laura described a fear of perceived reduced value at work in comparison with younger female colleagues. Penny was considering early exit while Laura's narrative was around her decision to not apply for a new job or put herself forward for promotion with her current employer:

... it's quite worrying if you change, if things change ... it's disconcerting dealing with menopause ... when you're working with (pause) there's all these younger people ... so that's hard when you're older.
(Penny, 51, teacher)

I would imagine if slim-younger-lady and fat-older-lady are going for a job, irrespective of experience and qualifications, there is no discussion there (pause) which is terrible. (Laura, 50, teacher)

Lack of confidence was presented as a form of self-deprecating identity talk, rooted in the fear of unknown symptoms and processes of the menopause. What was striking was that this narrative of declining confidence was from women who admitted to being very confident throughout their lives. As with Penny and Laura above, Isla, a 58-year-old project manager, also compared herself with younger colleagues. While her narrative was around practical skills-based attributes, she attributed her not applying for a new project to her lack of confidence due to menopause symptoms at work:

I think menopause, it's a different experience for everybody ... you suddenly start to panic, it's like an emotional wave and you think I'm never going to be able to fend these young people off and they are not going to want me ... I've lost confidence ... it's like a form of coping mechanism that as you get older you have to perform better because those behind you can do it without putting the extra work in.

Further, Vera, a 56-year-old events manager, also highlighted the issue of menopause-related reduced confidence. She highlighted a lack of information and research available to women, where much of what she has learned about her symptoms was derived from what she referred to as "anecdotal" evidence. While Vera retained her position in the world of work, she acknowledged days when she would contemplate early exit from the labor force:

... complete lack of confidence ... I had all these weird things, itchy skin, my hair starting falling out, terrible flooding ... The menopause you're a disaster ... I would sit in my office and I would think I just wanted to shut the door and just cry 'cause I felt so terrible but I had no idea why ... it can be quite isolating.

The menopause was undoubtedly written on to the body of these women through their perceptions of ageing and discomfort of symptoms. There was a sense of resignation to the physical impact of the menopause at work: "*the fatigue sets in*," "*just the nature of the game*." It is this aspect of hiding for a decade within the world of work, between the ages of mid-40s and late 50s, that is incongruous with employer expectations of performance and at odds with the UK Government's extending working lives agenda. If women are feeling silenced, invisible, and actively hiding from work due to a natural biological process that impacts 100% of women in some way, it is clear that there should be research and policy focus on understanding how women individually and personally experience menopause at work. These issues are discussed further in the next section.

5 | DISCUSSION

This article analyzed how older female workers constructed their identity around their experiences of managing menopause at work through a form of identity talk: *menopause talk*. Data revealed that menopause talk was entirely negative and self-deprecating, and unlike other previously identified forms of negative identity work, menopause was not conducted as a tactical strategy (Down & Reveley, 2009), nor to reconcile putative “real selves” (Costas & Fleming, 2009), nor to preserve an integrity of self (Clarke et al., 2009). Menopause talk was conducted by women to describe natural, biological changes to the older female body. Crucially these negative descriptors of work identity, of bodily processes and of a threatened place within the world of work acted to interrupt an otherwise integral and personal neoliberal discourse.

It would appear that female participants in this study who discussed the menopause, all of whom raised the subject in relation to the appearance of bodily ageing, personally felt the responsibility to manage or cope with their own menopause symptoms at work. Through gendered agency participants “hid,” “endured,” “learned to live with,” and ultimately reluctantly accepted the impact of menopause symptoms at work. While participants spoke of a strong neoliberal narrative around “get yourself together,” there was also evidence that labor force participation had been and could be adversely impacted by menopause symptoms. This was clearly exacerbated by the fact that women self-navigated through their unknown individual cocktail of menopause symptoms, experiencing a sense of fear which challenged their inherent sense of (trait) resilience, confidence, and neoliberal “can do” attitudes, culminating in a within-person identity talk contradiction of resilience/vulnerability.

The perceived requirement of self-help was evident through women not seeking medical advice, or when medical advice was sought refusing prescribed medication through fear. This was also attributed to the lack of awareness in what actually is menopause, what are the symptoms and how menopause can and should be managed at work (Grandey et al., 2020). It should also be stated that income, educational attainment, and job status did not seem to have any impact on how menopause symptoms were experienced at work. Also, while this study did not measure trait resilience, confidence, self-efficacy, or conscientiousness, there were participants who described themselves as high in these individual differences; the impact of menopause symptoms seemed to be indiscriminate in that it impacted all participants regardless of personality traits. Further studies could consider the moderating effect of these traits on effects of menopause at work.

Cameron et al. (2019) in their systematic review of the female ageing body at work concluded that individuals working with older women must recognize the “prevalence of anti-ageing discourse” (p. 12). I contribute to that assertion by highlighting the importance for individual older women *themselves* to understand the potentially destructive nature of their own anti-ageing discourse. Within-person contradictions of resilience/vulnerability demonstrated how negative and self-deprecating identity talk can become self-fulfilling by interrupting an otherwise neoliberal discourse. Participants felt the need for personal responsibility to present their best selves and mask or hide any negative impact of the menopause at work, reinforcing the concept of the ideal older worker as one that “hasn't aged at all” (Rowe & Kahn, 1998, 2015). While bodily identity provided the organizational agent with a performative platform through which they could convey their value within the world of work (Bourdieu, 1984, p. 476), this platform was conflicted as resilient/vulnerable. Despite women's value through experience and consistency of performance to their employer, the engagement in menopause talk interrupted this neoliberal work identity. This resulted in a conflicted and contradictory bodily identity: one that portrays strength and neoliberal fortitude “you could put it on a wee shelf and deal with it ... I didn't take time out” while identifying as “a hot emotional mess,” “a weeping wreck.” In a sense, the self-defeatist menopause talk battling it out with neoliberal determinism created an internal identity conflict.

Menopause remains shrouded in mystery, a taboo topic at work, a “problem” that women must seemingly face alone and in private (Atkinson et al., 2020; Grandey et al., 2020). This way of thinking is clearly detrimental to women's identity where male-dominated or gender-neutral work structures do not allow for the undisciplined body

to be displayed (Trethewey, 1999). Participants here appeared to self-reinforce the perception that menopause is something to be “*dealt with*,” “*fixed*,” or managed away from work.

Participants experienced organizational marginalization and subtle gendered ageism (Hurd Clarke & Griffin, 2008; Krekula, 2007), however, this appeared to be motivated or triggered by (perceived) perceptions of others (Meister et al., 2014, 2017); there was a sense that women, through menopause talk, were placing themselves in a dominated position. This was evident through presentation or hiding the menopausal body. One example provided was Deborah who actively reduced her perceived femininity by wearing baggy clothing to hide her menopausal body, resulting in a new precarity at work by being silenced, invisible, or “erased from the workplace” (Thomas et al., 2014). However, such behaviors appeared to be motivated by how older women perceived that they were being perceived by out-group others (Meister et al., 2014, 2017). This highlights the underexplored importance of how older women identify with their menopausal bodies through the eyes of those who themselves have not (younger women) and might never (men) experience menopause themselves.

6 | CONCLUSIONS

The article contributes to the understanding of experiences of menopause at work in two ways. First, by contributing to the emerging qualitative empirical literature around the impact of menopause at work, participant narratives increase awareness of the complexities and heterogeneity of managing menopause at work. Gender scholars have called for the ageing female body to be more prevalent in organization studies (Calasanti & King, 2018; Hurd Clarke, 2018). Due to the paucity of empirical studies of the impact of menopause symptoms at work (Cameron et al., 2019; Jack et al., 2016), we know so little about how it is experienced by women around the UK. In response, I provide evidence that the natural, “normal” biological processes of the menopause can interrupt and impair older women's attitudes to labor force participation. It is perhaps the individualized nature of the impact of symptoms as well as the taboo nature of the menopause (Grandey et al., 2020) that have prevented studies into this ubiquitous aspect of biological ageing. Findings in this article highlight the need to place menopause firmly on the gendered organization studies agenda.

Second, findings in this article provide evidence of how attitudes around labor force participation and working longer were not only due to menopause symptoms, but how women experienced perceptions of others based on the appearance of their menopausal body at work. The extending working lives agenda is gaining more prominence as the working population ages and women over 50 become the fastest growing demographic of labor force participation, as such, there is a need to better understand factors affecting older female workers (Loretto & Vickerstaff, 2012). These findings provide a more nuanced understanding of how menopause symptoms impact older female workers. Organizational managers, in order to change how the menopause is understood by women, must incorporate menopause strategies that consider how the individual nature of the menopause impacts work. Atkinson et al. (2020) highlight knowledge gaps in how employment type, income, and education contribute to managing the menopausal body. This article contributes to this work by providing evidence that menopause talk is a great leveler in many respects in that it is largely indiscriminate. This should be considered when designing a workplace menopause strategy. Findings highlight the threat of menopause to body confidence and its impact at work. While individual differences, such as confidence, act as a shield to internalized ageism (Caza et al., 2018), findings here demonstrate the potential of menopause to disrupt, reduce, or interrupt women's confidence. Caza et al. (2018) found that individual differences, specifically confidence, is an underexplored area in identity work, further it is underexplored in the emerging body of work on menopause at work. As such, the role of individual differences is an area requiring further research and has implications for how organizations choose to manage the female ageing, changing body.

This article illustrates the identity conflict experienced by women who, through no fault of their own, and by experiencing natural biological ageing at work feel conflicted as to their value within their world of work. By

maintaining a neoliberal attitude towards identity construction and management through identity work, women agentially engage in management of their ageing bodies due to a strong sense of personal responsibility. However, “menopause talk” has demonstrated here how, for some women, that strong sense of self can be interrupted and weakened to the point where individuals find themselves in precarious work outcomes. Employers should shift their focus on menopause management from reactive to proactive, bearing in mind that managing menopause is an individual-level HRM challenge as such broad-based policies at organizational level might have little impact.

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CONFLICT OF INTEREST

The author declares that there is no conflict of interest that could be perceived as prejudicing the impartiality of the research reported.

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